

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 05/12/08
Case #: 22-43123
County: LAGRANGE

Address: 400 E S/OE 450 S
WOLCOTTVILLE, IN
46795

Type of Laboratory Seizure (check one)

- ☐ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence
☐ Outbuilding
☐ Vehicle
☐ Hotel/Motel
☒ Open - No Structure
☐ Other:

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ Lithium/Ammonia Reaction(s): open AIR
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Flammable Solvents: open AIR
☐ Water Reactive Metal (Lithium): _____
☐ Anhydrous Ammonia: _____
☒ Hydrochloric Acid Gas Generator(s): open AIR
☐ Corrosive Acid: _____
☐ Corrosive Base: _____
☐ Other (item and location): _____

DUMPSITE

Child under age 18 discovered (check one)

- ☐ Yes 2 (number present)
☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
☐ Retail/Merchant Tip
☐ Other: _____

This report is to be faxed to the following agencies that serve the location:

Fire Department: JOHNSON TWP

Health Department: LAGRANGE CO

Child Protection Service: _____

Fax: 260-854-3402

Fax: 260-463-4189

Fax: _____

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: COLLINS Phone 260-432-8661

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.